



LOS ANGELES COUNTY COMMISSION ON HIV HEALTH SERVICES

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While not required of meeting participants, signing-in constitutes public notice of attendance. Presence at meetings is recorded solely based on sign-in sheets, and not signing-in constitutes absence for Commission members. Only members of the Commission on HIV Health Services are accorded voting privileges, thus Commissioners who have not signed in cannot vote. Sign-in sheets are available upon request.

COMMISSION ON HIV HEALTH SERVICES MEETING MINUTES April 14, 2005

Approved 5/12/05

MEMBERS PRESENT	MEMBERS ABSENT	PUBLIC (cont.)	HIV EPI AND OAPP STAFF
Al Ballesteros, <i>Co-Chair</i>	Nettie DeAugustine, <i>Co-Chair</i>	Jeffrey Goodman	Leticia Alatorre
Ruben Acosta	Ruth Davis	Juan Guerrero	Gordon Bnch
Adrian Aguilar	Richard Eastman	Miki Jackson	Marcy Fenton
Carla Bailey	Nancy Eugenio	Denise Johnson	Rochelle Hom
Anthony Braswell	William Fuentes	Kelly Kent	Ray Johnson
Carrie Broadus	Alexander Gonzales	Jean Kigozi	Lurlene Joyce
Robert Butler	Chuck Henry	Kevin Lewis	Nhan Le
John Caranto	Michael Lewis	Luis Lopez	Mario Perez
Charles Carter	Elizabeth Marte	Davyd McCoy	Gwendolyn Thompson
Whitney Engeran	Elizabeth Mendia	Sue McGinnis	Diana Vasquez
Hugo Farias	Alexis Rivera	Ruel Nollado	Amy Wohl
Gunther Freehill	Fontaine Shockley	Quentin O'Brien	Juhua Wu
John Griggs	Vanessa Talamantes	Michael O'Connor	
David Giugni	Fariba Younai	Everado Orozco	
Richard Hamilton		Angelica Palmeros	COMMISSION STAFF/ CONSULTANTS
Rebecca Johnson-Heath		Marissa Parsons	
Wilbert Jordan	PUBLIC	Carlos Peralta	Virginia Bonila
Marcy Kaplan		Rick Platt	Kathleen Clanon
Brad Land/Dean Page	Cinderella Barrios-Cernik	Andrew Signey	Gary Garcia
Anna Long	Jeff Byers	James Skinner	Jane Nachazel
Andrew Ma	Mario Chavez	Jon Stockton	Glenda Pinney
Vicky Ortega	Alicia Crews-Rhoden	Carolyn Stoutt	Doris Reed
Chris Perry	Susan Forrest	Brigitte Tweddell	Sherry Rolls
Wendy Schwartz	Alex Garcia	Gary Vrooman	James Stewart
Kathy Watt	Terry Goddard	Rocio Yong	Nicole Werner
	Elizabeth Gomez	Patricia Woody	Craig Vincent-Jones

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I. CALL TO ORDER: Mr. Ballesteros called the meeting to order at 9:58 am. Roll call was taken. He welcomed and asked the potential Commission nominees to introduce themselves as well.

II. APPROVAL OF AGENDA: Because he had to leave early, Mr. Freehill requested that Item XIII C 2 be moved before the Parliamentary Remarks and to be followed the OAPP Report. Mr. Vincent-Jones asked that Item III A be deleted.

MOTION #1: Agenda approved with amendments (*Passed by Consensus*).

III. APPROVAL OF MEETING MINUTES:

A. Annual Meeting, November 15-16, 2005:

MOTION #2: (*Motion Postponed*).

B. March 10, 2005: Minutes approved with no changes.

MOTION #3: Minutes of March 10, 2005 Commission meeting approved (*Passed by Consensus*).

IV. PARLIAMENTARIAN REMARKS: There was no report.

V. PUBLIC COMMENT, NON-AGENDIZED:

- Mr. Lopez, representing Altamed Health Services and the Latino Coalition Against AIDS, explained that the Coalition is the OAPP-funded Community Development Initiative (CDI). He reported that the Coalition convened a summit last Fall. Approximately 125 Latino and non-Latino policymakers and experts attended. The participants were charged with developing a series of recommendations, which were encompassed in a report that Mr. Lopez distributed. He acknowledged Mr. Ballesteros, members of the Coalition Advisory Committee, and representatives from those agencies for their help with the summit. Mr. Lopez continued to say that the next steps were the adoption of a few recommendations over the next year or two. The Coalition would be convening task groups around each one of the seven round tables detailed in the report. Mr. Engeran congratulated Mr. Lopez on a great report and the Coalition work of the Coalition. He asked if it was possible to speak to the Coalition about SB 945, to which Mr. Lopez agreed.
- Mr. Kent introduced himself as the new HOPWA Coordinator with the Los Angeles Housing Department. He encouraged attendance at the LACHAC meetings, every fourth Wednesday of the month. He indicated his intent to work more collaboratively with the Commission and to visit the various contractor sites in the near future, noting that he can be reached at kkent@lahd.lacity.org or directly at (213) 922-9661

VI. CO-CHAIRS' REPORT: There was no report.

VII. EXECUTIVE DIRECTOR'S REPORT:

- Mr. Vincent-Jones announced that the Commission website has been finally launched, reporting that the new website address is www.hivcommission-la.info. He explained that it will be developed in two phases, noting this launch represented the first of the two. The first phase encompasses legal mandates, County and HRSA requirements. The second phase will incorporate the elements to make the website an educational and informational training tool. He explained that he was hoping that the Commission could secure Information Technology funds from the County for the project's second phase. He asked for everyone's patience, adding that it would take several weeks to load all of the necessary information on the website once it has been launched. Ms. Broadus asked why, given the Commission's website link to OAPP, OAPP had not yet linked to the Commission. Mr. Vincent-Jones responded that it was simply a matter of requesting the link, and he had not yet submitted the letter but would do so shortly.
- Mr. Vincent-Jones signaled that a new version of the February Commission meeting minutes had been included, indicating that Mr. Land had asked for further elaboration on some of his comments. As they had been previously approved with those changes, they did not need to be approved again.
- Mr. Vincent-Jones announced the Commissioners' Leadership Conference, sponsored by the Quality and Productivity Commission, was scheduled for May 26, 2005 and encouraged Commissioners to attend. David Janssen, the County's CAO, was scheduled as the keynote speaker, and a flyer was included in the packet.

VIII. STATE OFFICE OF AIDS (OA) REPORT: There was no formal report, but Mr. Byers introduced himself noting that he was temporarily representing the State until the new Director of the Office of AIDS Care Division is appointed and working..

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IX. OFFICE OF AIDS PROGRAMS AND POLICY (OAPP) REPORT:

- Mr. Johnson reported that DHS was notified from the State Office of AIDS that the Year 15 Title II award had been increased by approximately \$111,000.
- He continued that OAPP had been receiving numerous calls regarding the Year 15 contracts, especially from the residential and substance abuse providers. He reported that OAPP staff has been working aggressively with the DHS Contract and Grants division to expedite the process, adding that a temporary escrow account was being created to facilitate payments for some providers until the contracts are finalized. He added that they had been able to make adjustments in the CaseWatch system to allow the providers to invoice the office directly. In response to a question, Ms. Vasquez said they did not know when they would get the contracts yet.
- Ms. Vasquez reported that the State Office of AIDS provides OAPP with viral load, phenotype and genotype vouchers through the Therapeutic Monitoring Program (TMP). She went on to say that a couple of weeks prior, they had been notified that they would not be releasing any more vouchers to the County until next fiscal year. She indicated that OAPP had notified medical outpatient providers that they could use their medical outpatient allocations to cover the cost of the testing vouchers for the remaining three months of the fiscal year, adding that providers would be received a supply based on their prior usage within the next few days. Ms. Vasquez cautioned, however, that they would not be allocating additional vouchers after that until July 1, when she expected the program to resume as normal. She estimated that the cost approximates about 2% of the total medical outpatient budgets. Mr. Byers explained that the vouchers that were designated for Los Angeles County had been exhausted, clarifying that LA County uses the bulk of vouchers in the state. Mr. Vincent-Jones noted that in past years other jurisdictions hadn't used all of their vouchers, but evidently had this year. Ms. Broadus suggested that it was a standards of care issue and should be forwarded to that Committee for review. Several noted that it might necessitate written communication with the state, but Mr. Vincent-Jones noted that it might be more of an issue of planning for voucher utilization and allocating accordingly.

X. HIV EPIDEMIOLOGY PROGRAM REPORT:

- A. Morbidity Monitoring Project (MMP):** Dr. Wohl indicated that she believed the MMP to be one of the best designed, most useful studies that CDC has ever funded. It is a national probability sample of HIV-infected people in care to assess unmet need. The RAND Corporation has been working closely with CDC to develop the project. She discussed that Los Angeles County will be the first site to draw their facility sample. They will be working on trying to get the patient lists from selected providers in May, and will hire six research analysts to help conduct the interview and chart abstractions. Denise Johnson is the Project Coordinator and Rosa Valencia is the Field Research Coordinator. They will not begin the assessment activity until early next year.

XI. PREVENTION PLANNING COMMITTEE REPORT: Ms. Watt reported the highlights from the most recent PPC meeting:

- 1) They broke out in their committee meetings, with each committee giving an overview of their role and encouraging audience participation.
- 2) They had a presentation about the prevention plan that was released two months ago.
- 3) Ricky Rosales from the LA City AIDS Coordinator's office was elected as their new co-chair along with Vanessa Talamantes. Jeff Bailey was termed out.

Ms. Watt announced that on May 17-19, 2005, there will be a Transgender Conference in San Francisco, sponsored by the State Office of AIDS. She directed people to rdlent.com for scholarships or to go to the State Office of AIDS website for a link to the conference.

A. Overview of L.A. County HIV Prevention:

- Mr. Perez reported that one of the first outcomes of the joint PPC/Commission Co-Chair meetings was a commitment to improve collaboration between the two planning bodies. They agreed that the PPC would facilitate an overview of the HIV Prevention Plan 2004-2008. He added that he would take advantage of the opportunity to highlight some rapid testing innovations and AHP-related prevention efforts locally.
- Mr. Perez began the presentation by quickly reviewing of HIV prevention activities locally. He signaled the prevention goal of reducing new HIV infections by half by 2008. Nationally, there are about 40,000 new infections annually, and in Los Angeles County it is estimated between 1,500 and 2,000 new infections every year.
- Mr. Engeran noted that the HIV Epi profile did not include non-AIDS HIV infection data. He asked PPC and to relay their concerns to CDC to more clearly articulate their standards and expectations about HIV reporting. He expressed concern that Dr. Gerberding's letter to Congress was ambiguous, and does not adequately help guide the nation and California towards a more consistent data standard.

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- Mr. Carter asked if testing sites provide American Sign Language (ASL) interpreters during testing, and asked if there was data on how many people with disabilities are tested. Mr. Perez responded that testing is available for people with disabilities, but he did not have updated data on the number who actually got tested. He committed to seeing if he could find the data, and report it back to the Commission.

XIII. STANDING COMMITTEE REPORTS

A. Standards of Care (SOC) Committee:

1. **HIVQUAL:** Mr. Vincent-Jones introduced Dr. Clanon, reminding the Commission that she led the training at the annual meeting two years ago on evaluation and outcomes measurement. He explained that he had asked her to make a presentation to the Commission on HIVQUAL, an evaluation system increasingly used by Title III and IV providers, and one that OAPP is currently determining whether to engage or not.
 - Dr. Clanon reminded the audience that we all need to continue responding to the changing needs of people with HIV, to the changing world, to changing treatments, and to ensure that our work continues to improve all the time. She explained that quality management language was added to the CARE Act, stating that all Titles need to be addressing quality of care, for the first time in 2000 Reauthorization language. As a result, there is now Congressional intent to be assessing whether services are effective, are they yielding outcomes, and whether or not they are high quality services according to community standards. Dr. Clanon then went on to explain the HIVQual system, developed by the AIDS Institute of New York, and adopted by a number of jurisdictions and grantees throughout the country.
 - Ms. Broadus referred to the role of indicators in quality management, and asked how they comply with standards of care. Dr. Clanon responded that the standards of care are based on achieving the ideal health outcomes, and the indicators are the measure of whether or not those outcomes are being achieved. Dr. Clanon signaled her involvement with the ongoing standards development process led by the Standards of Care (SOC) Committee.
2. **Standards Development Process:** There was no report.
3. **Condoms in Prisons:** Mr. Vincent-Jones noted that there were memos in the accompanying packet summarizing the Committee's review of the issue, its referral to the Public Policy Committee, and indicating the Committee's closure of the issue.

B. Finance Committee:

1. **Year 15 Planning Council Support Budget:**
 - Mr. Vincent-Jones referred to the proposed Year 15 operational budget for the Commission in the packet. He explained that estimated final expenses for Year 14 were included for comparison purposes, as requested by the Executive Committee.
 - Mr. Vincent-Jones reported that Year 15 staffing, reflected in the personnel and benefits costs, is the largest Commission expense by far, noting that full staffing amounts to almost twice as much as the partial staffing cost from the year before. In response, he continued, the volume of consultant services had been reduced significantly.
 - He indicated that \$254,000 had been spent on continuous data collection in Year 14, a cost that was being reduced to \$90,000 in Year 15, which also includes expenses for H-CAP incentives. The total cost for continuous data collection in Year 14, he further explained, was due, in part, to consultant services for both Year 14 activities and Year 13 activities that had been delayed to Year 14 because Commission office transition occurred later than originally anticipated. Expenses for Year 14 incentives were also included.
 - He detailed that more funding would be invested in consultant services for the standards development process to developing standards of care in every service category. HRSA picked up some of the initial consultant costs through a Technical Assistance contract, so the Commission will have to match the remainder of the expense.
 - He additionally reported that the anticipated cost of the Assessment of the Administrative Mechanism had been reduced significantly after they had reviewed comparable costs for the project across the country.
 - Ms. Broadus expressed concern about the limitations on Commissioners and staff members attending trainings and accessing other educational opportunities. Mr. Vincent-Jones responded that the projected expense represents two people for one East coast trip each, based on prior expenses. He noted that the Commission is limited to spending funds on travel for only HRSA-approved purposes, and traditionally HRSA has only approved attendance for two people at a single conference during the year. He went on to say that HRSA has not indicated that they will be hosting either of those conferences in Year 15. Ms. Broadus reiterated her concern that it would be beneficial to have a larger representation of people with HIV and the planning council benefiting from these activities. Mr. Vincent-Jones concurred, but noted that his hands were tied on the issue, and that he could only expend funds for

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approved purposes. He further explained that the solution rested with finding alternate sources of funding for those uses, and he noted that he and Ms. DeAugustine had recently obtained agreement from DHS to allow the Commission to access some NCC for those purposes.

- Dr. Jordan asked why the budget was referred to as a “Planning Council Support” budget. Mr. Vincent-Jones responded that they had traditionally used that terminology when the Commission was part of OAPP, and the practice had simply continued. He added that it was probably wise to continue referring to it in such a manner given that he hoped that there would be both Title I funds and other funding supporting the Commission in future years.
- Mr. Vincent-Jones stipulated that there might still be some slight modifications to the budget before it is formally presented to the grantee, as he continues to solidify information about operational expenses from the Executive Office.

MOTION #4: Year 15 Planning Council Support budget approved as presented (*Passed by Consensus*).

C. Public Policy Committee:

1. **Condoms in Prisons—AB 1677:** Ms. Schwartz reported that the proposed legislation would mandate that the Director of Corrections allow CBOs to provide condom distribution; and that it would specify that possession of those devices could not be considered contraband.

MOTION #5: AB 1677 endorsed (*Passed by Consensus*).

2. **Name-based HIV Testing: SB 945:**

- Mr. Freehill reported that SB 945 is legislation co-sponsored by Los Angeles County, the California Health Officer Association and AIDS Healthcare Foundation. It would, if enacted, implement a system of name-based HIV reporting in California. He expressed that there has been good progress within the last month, but are far from success with the legislation.
- He and Mr. Engeran noted that there would be a Senate Health Committee hearing in Sacramento the following Wednesday, April 20th. Provided the legislation makes it out of committee, there would be at least one more committee hearing—going to Senate Judiciary possibly the following week and maybe Appropriations after that. He indicated that all three Committees had members who have already articulated opposition to it.
- They then said that if it makes it through the Senate, it will begin the entire process through the Assembly, although, by that time the arguments will have most likely been resolved. Following passage out of the Assembly, it would have to be signed by the Governor. The Governor has indicated some support by directing the Office of AIDS to provide technical assistance on implementing it, and that it is consistent with the California Performance Review Recommendations (CPR) which have been promoted by the Governor.
- Mr. Engeran acknowledged the Department of Health Services, Mr. Freehill, and the consumer members of the Commission who have worked so hard in this effort. He reported that several Commissioners had gone to Sacramento and had met with over 35 legislators about the issue over two-day period, yielding some very good discussions.
- Mr. Engeran further reported that Ms. DeAugustine and he had met with the Orange County Planning Council the night before, and that they had voted to support the bill, although by a closer vote.
- He added that the language had been finalized and amended, and was no longer in “spot” form as originally introduced.
- Mr. Freehill added that one of the interesting dynamics has been that for reasons good and bad, historical or not, HIV/AIDS has remained in the perception of most policy makers a gay issue. The reservations of the six Lesbian and Gay (LGBT) Caucus members are those issues that supporters of the legislation have addressed: anonymous testing, negative impact on testing, etc. He added that he hoped that, by the following week, the LGBT Caucus would take a relatively soft position in their opposition.
- Mr. Engeran emphasized that it is a health care issue for all people with HIV/AIDS, regardless of whomever traditionally provided leadership on HIV/AIDS issues. Mr. Land expressed that this disease is no longer just a gay and lesbian disease, and did not feel that the gay community should be sole decision-makers, especially given the consequences for communities of color. Mr. Giugni countered that the highest rate of transmission in LA County is among men having sex with men, although a majority of them are men of color.
- Mr. Ballesteros thanked the Commissioners who went to Sacramento. He felt it was important for the Commission to be there representing the interest of Los Angeles.

3. **Needles/Syringes: SB 1159 2004:** A letter supporting the DHS position, in accordance with the Commission policy on the issue, was included in the packet.

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4. **Medi-Cal Redesign:** Ms. Schwartz announced that the Medi-Cal Redesign Community Forum has been rescheduled for Friday, April 29, 2005, and the flyer was in the Commission packet.

D. Recruitment, Diversity and Bylaws Committee: Mr. Butler reminded everyone that the training after this meeting would conclude the new Commissioner training, and Dr. Clanon would be addressing quality management during the training.

E. Priorities and Planning Committee: Mr. Land said that they will try to forward the Comprehensive Care Plan in the future, and they are in the final steps of revising it.

XIV. COMMISSION COMMENT, NON-AGENDIZED: Various Commissioners commented on the length of the agenda and the numerous presentations. Mr. Vincent-Jones responded that there were no more presentations than usual, and that he had actually built in what he had anticipated was cushion time into the agenda. However, the Commission started a half-hour late, and the group spent a half-hour on an issue (SB 945: name-based HIV reporting) that had been scheduled for a five-minute discussion. He cautioned that arriving on time was the responsibility of Commissioners and it usually wasn't effective to start when there was a quorum because the group would have to return to the items to vote on them anyway, and it was disrespectful to invited speakers for them to begin their presentations when there were few Commissioners in attendance. He added that sticking to the agenda and starting on the time was the responsibility of every member and participant, or otherwise meetings would continue to go late.

XV. ANNOUNCEMENTS:

- Mr. Engeran requested that this meeting adjourn in memory of Pastor Michael Cole. He was the Pastor of Christ Chapel in Long Beach—one of the first gay churches. He was also the founder of the AIDS Food Store in Long Beach, and was one of the first people who brought food to people who needed it when no one else would at the beginning of the epidemic in Long Beach.
- It was announced the Eleventh Latino AIDS Conference was scheduled for Saturday, May 7, 2005 at the Convention Center. Over 1,000 participants were expected.

XVI. ADJOURNMENT: The meeting was adjourned at 1:45 p.m. in memory of Pastor Michael Cole.

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MOTION AND VOTING SUMMARY		
MOTION #1: Approve the Agenda Order.	<i>Passed by Consensus</i>	MOTION PASSED
MOTION #2: Approve the minutes from the November 15-16 2004 Commission on HIV Health Services Annual meeting.	<i>Motion Postponed</i>	MOTION POSTPONED
MOTION #3: Approve the minutes from the March 10, 2005 Commission on HIV Health Services meeting.	<i>Passed by Consensus</i>	MOTION PASSED
MOTION #4: Adopt the proposed Year 15 Planning Council Support budget, as presented.	<i>Passed by Consensus</i>	MOTION PASSED
MOTION #5: Endorse AB 1677 (Condoms in Prisons), in accordance with the presented motion.	<i>Passed by Consensus</i>	MOTION PASSED